

Change Request Form

This Change Notice changes Purchase Order # 4300494349. The changes reflected in this document become effective upon issuance of a fully approved Purchase Order. All terms and conditions, attachments, and references of Purchase Order # 4300494349 are hereby incorporated by reference and remain unchanged except as outlined in this change order. The Commonwealth and Contractor are responsible for promptly obtaining all required consents necessary to authorize the Contractor to perform the Services set forth in this Change Notice.

1 General Information

Change Request Name	ABC-MAP Integration Program	Date	06/13/2017
Prepared by	Jared Shinabery, Pa Dept. of Health Brad Bauer, Appriss	Change control #	0001

2 Requestor Information

Proposed Change Description and References:

The State of Pennsylvania Department of Health (PA DOH) seeks to increase the utilization of ABC-MAP data within clinical workflows by providing all authorized healthcare entities (ambulatory care units, acute care facilities, emergency care units, physician practices, pharmacies, and others) the ability to integrate ABC-MAP data into their Health IT systems, including Electronic Medical Records (EMRs), Electronic Health Records (EHRs), and Pharmacy Management Systems.

Justification:

The purpose of this change is to increase the utilization of ABC-MAP data within clinical workflows. This is achieved by providing near-instant and seamless access to critical prescription history information to both prescribers and pharmacists.

Impact of Not Implementing Proposed Change:

If this change is not implemented, the ABC-MAP program will not reach its full potential to get critical prescription history information to prescribers and pharmacists in a timely and easily accessible manner.

Alternatives:

No satisfactory alternatives.

Priority: ☒ **High** ☐ **Medium** ☐ **Low**

Who will test (job classification and/or person):

Appriss will conduct end-to-end tests from each healthcare entity's system to ABC-MAP via PMP Gateway.

Context Sensitive Help Update Needed? ☐ Yes ☒ No

3 Initial Review Results of the Change Request

Initial Review Date: 04/24/2017	Assigned to: Brad Bauer
<input checked="" type="checkbox"/> Approve for Impact Analysis	
<input type="checkbox"/> Reject	
<input type="checkbox"/> Defer Until:	
Reason:	
Priority Classification:	<input checked="" type="checkbox"/> HIGH <input type="checkbox"/> MEDIUM <input type="checkbox"/> LOW

4 Initial Impact Analysis

Cost / Schedule Impact Analysis Required? Yes ☒ No ☐

Impact on Cost:

The ultimate deliverable is the integration of users and pharmacies with the ABC-MAP system, including subscription service for the length of time listed in the Deliverables/Cost Breakdown chart below. Integration is complete when the authorized healthcare entity can successfully use PMP Gateway to make requests for patient reports from the ABC-MAP system on behalf of authorized users and receive prescription reports from the ABC-MAP system seamlessly without error or any significant delays. Users are individuals who are legally authorized to access the ABC-MAP system per Act 191 of 2014, such as prescribers. The cost of a given integration with a healthcare entity, which includes subscription service, is based on the number of prescribers or pharmacies. Prescribers are defined as medical professionals who actively practice in Pennsylvania and are authorized to prescribe controlled substances by the DEA. Pharmacies are defined as individual pharmacy stores that meet all the following criteria:

1. The pharmacy is licensed to dispense by the Pennsylvania Board of Pharmacy.
2. The pharmacy actively dispenses to patients in Pennsylvania.
3. The pharmacy is authorized to dispense controlled substances by the DEA.

Deliverables/Cost Breakdown:

Contract Term: PO Start to 8/31/19				
Timeframe of Line	Material	Quantity	Net Price	Total
PO start to 8/31/17	2 Year Subscription Based for Pharmacies	112	\$240.00	\$26,880.00
PO start to 8/31/17	2 Year Subscription Based for Prescribers	10,606	\$90.00	\$954,540.00
8/31/17 - 4/30/18	2 Year Subscription Based for Pharmacies	483	\$240.00	\$115,920.00
PO start to 4/30/18	2 Year Subscription Based for Prescribers	7,600	\$90.00	\$684,000.00
PO start to 6/30/18	2 Year Subscription Based for Pharmacies	499	\$240.00	\$119,760.00
PO Start to 6/30/18	2 Year Subscription Based for Prescribers	7,491	\$90.00	\$674,190.00
5/1/18-6/30/18	2 Year Subscription Based for Pharmacies	40	\$240.00	\$9,600.00
5/1/18-6/30/18	2 Year Subscription Based for Prescribers	633	\$90.00	\$56,970.00
9/1/17-6/30/18	2 Year Subscription Based for Pharmacies	623	\$240.00	\$149,520.00
9/1/17-6/30/18	2 Year Subscription Based for Prescribers	9,345	\$90.00	\$841,050.00
7/1/17-6/30/18	TOTAL SFY 2017-18			\$3,632,430.00
7/1/18 to 4/30/19	1 Year Subscription Based for Pharmacies	861	\$120.00	\$103,320.00
7/1/18 to 4/30/19	1 Year Subscription Based for Prescribers	14,000	\$45.00	\$630,000.00
9/1/18-6/30/19	1 Year Subscription Based for Pharmacies	656	\$120.00	\$78,720.00
9/1/18-6/30/19	1 Year Subscription Based for Prescribers	8,781	\$45.00	\$395,145.00
7/1/18 – 6/30/18	TOTAL SFY 2018-19			\$1,207,185.00
7/1/19 - 8/31/19	1 Year Subscription Based for Pharmacies	65	\$120.00	\$7,800.00
7/1/19 - 8/31/19	1 Year Subscription Based for Prescribers	878	\$45.00	\$39,510.00
7/1/19 - 8/31/19	TOTAL SFY 2019-20			\$47,310.00
	Total Pharmacies	3,339		
	Total Prescribers	59,334		
	Total Contract Budget			\$4,886,925.00

5 Impact Analysis Results

Definitions

The defined terms will have the same meanings in this Change Order as they do in the RFQ #610036032. There may be additional definitions contained herein.

“EMR” means Electronic Medical Record, a system containing the medical and treatment history of a patient in a clinical practice.

“EHR” means Electronic Health Record, a longitudinal record of a patient's health information generated by one or more encounters in any care delivery setting.

“Pennsylvania Patient & Provider Network,” also known as P3N, is a network of networks, connected by a thin layer of services, governed by the Pennsylvania eHealth Partnership, defined as a suite of registries and indexing and security services which help to create a pathway between HIOs.

“Pharmacy Management System” is software to manage treatment of patients, dispensing of prescriptions, control of inventory and other functions.

“Healthcare entity” is a non-profit, or commercial, or government owned entity licensed to operate and provide patient care. A healthcare entity may have one or more care-providing settings including, but not limited to clinics, ambulatory care or outpatient care units, acute care settings, community health centers, and pharmacies.

“Health information organization,” also known as HIO, is a Pennsylvania-certified regional network that facilitates the exchange of secure health information between healthcare entities.

“Health IT System” is any software system that is utilized as the primary software system to manage patient care. Examples include an Electronic Medical Record, Electronic Health Record, and Pharmacy Management System.

High-Level Requirements:

1. Appriss shall provide a reliable integration service, available 24 hours, 7 days a week, 365 days a year, that provides Health IT Systems of authorized healthcare entities the ability to make requests for patient reports from the ABC-MAP system on behalf of authorized users and receive prescription reports from the ABC-MAP system.
2. Appriss shall provide healthcare entities with technical documentation (the Application Programming Interface) that describes how to connect to, and use PMP Gateway.
3. Appriss shall provide designated IT personnel within authorized healthcare entities with technical support as required during the implementation phase and while in production to diagnose and resolve any issues related to the integration services.
4. Appriss will operate a support center, available 24 hours, 7 days a week, 365 days a year, to receive incoming support requests from designated IT personnel within authorized healthcare entities.

5. Appriss shall provide a status report and dashboard that shows progress towards the targeted number of integrations of pharmacies and users, as defined in this document.
6. Appriss shall integrate PMP Gateway with Health IT system vendors that PA DOH selects without any startup or recurring fees to the healthcare entity or PA DOH, other than those listed in the Deliverables/Cost Breakdown chart. Any charges from the healthcare entity's health IT system will be the responsibility of the healthcare entity.
7. If requested by PA-DOH, Appriss shall integrate PMP Gateway with the Pennsylvania Patient & Provider Network (P3N) or any regional health information organization (HIO) in Pennsylvania without any startup or recurring fees to the P3N, HIO, participating healthcare entity, or PA DOH, other than those listed in the Deliverables/Cost Breakdown chart.
8. Appriss shall provide a production-like test environment that allows the healthcare entity to test their integration before utilizing PMP Gateway with the live ABC-MAP system.
9. Appriss shall deliver subscription service to authorized healthcare entities for the length of time listed in the Deliverables/Cost Breakdown chart in this document at no additional cost. The expiration of the subscription service must be defined in the Terms and Conditions of Use which is signed by each authorized healthcare entity. Subscription service shall begin when integration is complete and end at the expiration date defined in the Terms and Conditions of Use.
10. At the request of PA DOH, Appriss representatives shall travel to Pennsylvania to attend certain major milestone and planning meetings that have direct impact on the overall success of the project.
11. Appriss shall assign a dedicated project manager who is responsible for managing the overall project and ensuring that deliverables are completed on schedule, risks are minimized, and issues are identified and resolved quickly.
12. PMP Gateway shall offer adequate protection of patient data during transit and at rest, and meet the National Institute of Standards and Technology (NIST) cybersecurity guidelines. This includes but is not limited to using 2-way-Secure Sockets Layer (SSL) or 2-way-Transport Layer Security (TLS) mutual authentication.
13. PMP Gateway shall have a mechanism for reliably finding and retrieving the correct patient record from ABC-MAP based on the information contained in the healthcare entity's health IT system with a 99% success rate. If a record was not found due to incorrect information in the ABC-MAP patient record (not including variations in name or address formatting and abbreviation), that does not count against the success rate.
14. PMP Gateway shall enable authorized healthcare entities to query other states' data if those states participate and are activated with PMP InterConnect.

15. Appriss shall guarantee that the average PMP Gateway query response time does not exceed five seconds in any weekly period.
16. Appriss shall monitor the performance status of PMP Gateway 24 hours, 7 days a week, 365 days a year and proactively notify PA DOH and integrated healthcare entities via email of any unplanned downtime or performance issues impacting PMP Gateway within 2 hours of the occurrence. Appriss shall give at least one week notice of any planned downtime.
17. Appriss shall not restrict the number of PMP Gateway users an integrated healthcare entity can have.
18. Appriss shall perform authentication of the requesting healthcare entity's credentials and validate the incoming user. If deemed necessary by PA-DOH, validation of the incoming user will be performed by verifying that the user has an active account in the PMP AWARxE system.
19. Appriss shall develop the ability to display PMP Gateway query history inside of PMP AWARxE's query history so a user or admin can see all PMP AWARxE and PMP Gateway queries in one place.
20. PA DOH reserves the right to terminate the PMP Gateway access of healthcare entities or terminate individual user access at any time.
21. Appriss shall permit any healthcare entity to receive data from PMP Gateway in the XML format at the sole discretion of PA DOH.

Support Requests

22. Appriss shall target to respond to each request for support based on the priority level assigned to the matter as described in the table located in Appendix A.
23. Appriss shall respond to requests for support via one of the three listed methods:
 - a. direct phone call to the authorized healthcare entity
 - b. direct email to the authorized healthcare entity
 - c. automated updates on progress/status as the help ticket progresses through the Appriss Customer First Center (CFC).
24. For Priority 1 issues, as defined in the table located in Appendix A, Appriss shall provide all affected customers with hourly updates which include information on where in Appriss is in the resolution process and the estimated time remaining until resolution.
25. Appriss shall provide PA DOH all the support requests that have been generated by the healthcare entities. This includes a status and a resolution update of all the associated support requests.

Program Kickoff

26. Appriss shall collaborate with PA DOH to identify and assemble a team of key stakeholders and Program Sponsors.
27. Appriss shall collaborate with PA DOH to develop Key Performance Indicators (KPIs) for the program.
28. Appriss shall conduct a detailed walkthrough of the current customer onboarding process including template project plan, work breakdown structures, testing plan and key milestones.
29. Appriss shall collaborate with PA DOH to finalize the Integration Request Form as well as establish a process for both Appriss and PA DOH to track and prioritize integration requests and document the progress of each healthcare entity who submitted a form from first contact to completion of integration. The healthcare entity progress tracking dashboard should be hosted in a central location that tracks changes and permits both Appriss and PA DOH to access and edit it at any time. Appriss will update the healthcare entity progress tracking dashboard at least weekly.
30. Appriss shall collaborate with PA DOH to identify the program leadership structure, key points of contact and points of escalation.

Design Phase

31. In collaboration with PA DOH, Appriss shall develop Terms and Conditions of Use to be signed by healthcare entities before they can subscribe to the integration services. PA DOH will have final approval authority on the Terms and Conditions of Use.
32. Appriss shall develop an onboarding process for healthcare entities, which includes:
 - a. Workflow for handover of approved integration requests from PA DOH to Appriss
 - b. Integration project management to onboard healthcare entity on to PMP Gateway
 - c. A welcome packet containing the following:
 - i. A summary of what integration is, how it works, and how it benefits healthcare entities.
 - ii. A comprehensive list of all integration options available to the healthcare entity (such as configurations and features) and any decisions they need to make relating to integration.
 - iii. A detailed explanation of PMP Gateway's security which explains why it is safe for healthcare entities to use.

- iv. An overview of the integration process from start to finish which clearly defines who the tasks are assigned to.
 - v. Which features of PMP AWARe are and are not included in PMP Gateway.
 - vi. The Terms and Conditions of Use described above in paragraph 30.
 - d. The welcome packet shall not include information on any analytical tools or products for healthcare entities apart from PMP Gateway.
33. Appriss shall work with PA DOH to define test patient data to be used by healthcare entities to conduct their end-to-end connection tests.
34. Appriss shall work with PA DOH to define escalation processes that involve the state.
35. Appriss and PA DOH shall develop communication strategies together to inform and invite healthcare entities to leverage the capabilities to connect their respective health IT systems to PMP Gateway.
36. Appriss and PA DOH will identify the top health IT system vendors and develop communication strategies to inform and invite health IT system vendors to build integrations to PMP Gateway to help their customer healthcare entities in Pennsylvania.
37. Appriss will provide the integration status of all identified health IT system vendors, including the vendor name, status (in review, pre-development, development complete, in place), estimated date of integration, and any explanatory notes. This health IT system vendor status dashboard will be hosted in a central location that tracks changes and permits both Appriss and PA DOH to access and edit it at any time. Appriss shall update the health IT system vendor status dashboard at least every two weeks.
38. Appriss shall notify PA DOH of any changes and change management processes related to the ABC-MAP Integration Project.
39. Appriss shall work with the ABC-MAP team to ensure that there are formal communication plans established to ensure minimal disruptions to the user community.
40. If there are any scalability requirements on ABC-MAP platform, Appriss shall review them based on current and forecasted usage statistics. Enhancements to improve performance and scalability of ABC-MAP shall be performed by Appriss as necessary to ensure the success of the ABC-MAP Integration Program.

Program Launch Phase

41. Appriss shall host a series of informational webinars to help interested parties gain better understanding of the program and available technology and tools to connect to PMP Gateway.

42. Appriss shall create a document to address frequently asked questions.

Roll Out Phase

43. For each healthcare entity that is reviewed and approved by PA DOH, Appriss shall work with the healthcare entity (or its health IT system vendor) to develop using the application program interface (API) specifications of PMP Gateway.
44. Appriss shall assist and participate with the healthcare entity when conducting end-to-end testing from the healthcare entity's system to ABC-MAP via PMP Gateway.
45. Appriss shall familiarize the healthcare entity's designated IT staff with the escalation and support process.
46. Appriss shall notify PA DOH upon roll-out of the healthcare entity and add its metrics to the regular status reports.

Ongoing Operations and Support Phase

47. Appriss shall provide the PA DOH information regarding the use of the integration services by healthcare entities on a weekly basis. Such information must be available as a Microsoft Excel File or a Comma Separated Values (CSV) file. Said information includes, but is not limited to:
- a. Healthcare entity organization name
 - b. Number of transactions from healthcare entity to ABC-MAP within any timeframe
 - c. Specific users within healthcare entity's organization that have requested ABC-MAP reports
 - d. Specific facilities from which healthcare entity's authorized users have requested ABC-MAP report
 - e. The number of requests made that resulted in a patient report being returned, and the number of requests made that did not result in a patient report being returned.
 - f. The average response rate of PMP Gateway for integrated users in Pennsylvania within any timeframe.
 - g. Specific patient reports accessed via PMP Gateway, with cross-references to the response identifier provided by the underlying PMP AWARxE system.
48. Appriss shall hold meetings with PA DOH to review the progress of the Program on a regular basis and adjust the plan to accomplish the overall program objectives, as set forth by the PA DOH. Appriss shall also present any emerging issues, lessons learned

and planned enhancements to the system. The frequency of these meetings will be at the discretion of PA DOH team.

Period of Performance

The period of performance for the ABC-MAP Integration Program commences when Appriss receives an executed purchase order. This project is an ongoing program and will continue to onboard healthcare entities to access and integrate ABC-MAP data into physician and pharmacist workflows until the end of the contract.

Schedule

The below list consists of the initial milestones for the ABC-MAP Integration Program. The timelines are presented as days from the effective date of the contract and receipt of a purchase order.

<i>Schedule/Milestone</i>	<i>Within (x) business days from purchase order effective date</i>
Program kickoff	10
Program leadership structure and points of contact identified	10
Availability of ABC-MAP integration program announced to healthcare community and Integration Request Form made available.	15
Terms and Conditions document finalized	15
Key performance indicators for overall program defined	20
Healthcare entity progress tracking dashboard made available	20
Health IT system vendor status dashboard made available	20
Test plan defined and test patient data loaded into ABC-MAP	30
PMP Gateway reporting package reviewed by PA DOH	30
Healthcare entity onboarding process, including welcome packet, finalized	30

Acceptance Criteria

PA DOH's project leader will review the customer onboarding process and documents, key performance indicators, health IT system vendor status dashboard, and healthcare entity progress tracking dashboard and formally approve or reject each deliverable in accordance with the original agreement.

Program success is measured against the set milestones and Key Performance Indicators. Any variances from goals will be monitored and Appriss and PA DOH will collaborate to refine plans to attain the goals.

Impact of Not Implementing the Change:

If this change is not implemented, the ABC-MAP will not reach its full potential to get critical prescription history information to prescribers and pharmacists in a timely and easily accessible manner.

Alternatives to the Proposed Change:

No satisfactory alternatives.

Final Recommendation:


Leverage PMP Gateway to integrate ABC-MAP data into the workflows of physicians and pharmacists in Pennsylvania.

6 Approvals

Signature
Name Meghna Patel
Director, Prescription
Drug Monitoring
Title Program Office
Date

Signature
Name Patrick Keating
Title Chief Information Officer
Date

Appriss Inc. Authorization:


Signature

Name: Brad Bauer
Title: Vice President, Business Development
Date:


Signature

Name: Natalie Browning
Title: Director of Client Relations
Date:


Signature

Name: Rob Cohen
Title: President
Date: 6/22/2017

Appendix A

Priority Level	Description	Response Time* Target (Business Hours from creation of service ticket by CFC)
1	The Gateway Service is non-operational or users cannot access the system, or the functionality is significantly decreased or back up or other security of data can no longer be performed. The defect affects mission-critical functions or information in the production environment and may include, but not be limited to, data loss or corruption, system crash or missing major functionality. This may include any defect related to system availability, overall data integrity, or ability to serve the Licensee.	1
2	The Gateway Service is operational with functional limitations or restrictions but there is minimal business impact. Under a Priority 2, the defect will have a large impact on the functionality of the application, but does not require immediate release into the production environment. This defect allows continued use of the application, but there is a known compatibility or operability disruptions with no known Licensee acceptable work-around or missing minor functionality.	2
3	The Gateway Service is operational with functional limitations or restrictions that are not critical to the overall system operation, and the defect has a moderate impact on the functionality of the application. However, the application remains usable by all groups. A functional error exists for which there is a Licensee acceptable workaround. Failures assigned this priority level cause no delays in production.	8
4	The Gateway Service is operational with problems or errors, which have little impact on system operations. Priority 4 shall include, but are not be limited to, documentation errors. Priority 4 defects have a minor or cosmetic error in the functionality of the application in a production environment. Defect has no impact on the ability to execute a production application however. Failures assigned this priority level cause no delays in production.	24

* Response Times refers to the time within which Appriss will initiate the problem confirmation, diagnosis and resolution process. Response Times are different from time to answer a call. Calls to Appriss will be answered in the order in which they are received, with a target speed to answer of less than 90 seconds for all issues. Email inquiries will be acknowledged within 2 hours of receipt. Response Time are also different from resolution times. Resolution times will vary based on the severity and complexity of the issue.